THIS FORM IS EFFECTIVE FOR ACCOUNTING PERIODS BEGINNING JANUARY 1, 2011 If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

SA1-2 Short Form

STATEMENT OF ACCOUNT		FOR COPYRIGH	T OFFICE USE ONLY	Return to: Library of Congress Copyright Office
	Transmissions by	DATE RECEIVED	AMOUNT	Licensing Division
Cable Systems (Short Form)			\$	101 Independence Ave. SE Washington, DC 20557-6400 (202) 707-8150
General instructions are at the end of this form [pages (i)-(vii)].		08/27/2018 ALLOCATION NUMBER		For courier deliveries, see page ii of the general instructions
A A	CCOUNTING PERIOD COVERE	D BY THIS STATEMENT:		

	ACCOUNTING I ERIOD COVERE	D DT THIS STATEMENT.						
Accounting Period	January 1, 2018 - June	30, 2018						
B Owner	- Inconcet information and print of type the concet information beside it.							
	LEGAL NAME OF OWNER/MAILING AD	DRESS OF CABLE SYSTEM						
	Vyve Broadband J, LLC							
			0	2877420181				
				028774 2018/1				
	Four International Drive, S	uite 330						
	Rye Brook, NY 10573							
С			ntify the business and operation of the syste ne system, if different from the address giver					
System	1 IDENTIFICATION OF CABLE SYSTEM:							
	AAILING ADDRESS OF CABLE SYSTEM 234 N Windriver Drive (Number, street, rural route, apartment, or suite in Douglas, WY 82633 (City, town, state, 2p code)							
	Instructions: List each separate comm	nunity served by the cable system.	A "community" is the same as a "community"	ty unit" as defined				
D	-	, , , , , , , , , , , , , , , , , , , ,	uding unincorporated commuinites within ur	•				
•	0 0 1	· /	6.5(dd). The first community that list will ser					
Area Served			use it as the first community on all future fili or mobile home parks should be reported in	-				
	the identified city.							
	CITY OR TOWN	STATE	CITY OR TOWN	STATE				
First	Glenrock	WY						
Community	Glenrock County	WY						
	Rolling Hills	WY						
form in order to pro numbers. By provid search reports pre	ocess your statement of account. PII is any persona ding PII, you are agreeing to the routine use of it to	al information that can be used to identify or establish and maintain a public record, whi e PII requested is that it may delay processi	he personally identifying information (PII) requested on trace an individual, such as name, address and teleph ch includes appearing in the Offce's public indexes and ing of your statement of account and its placement in th t would be made by a court of law.	none I in				

Form SA1-2c Rev 04/2011

ACCOUNTING PERIOD: 2018/1

				FORM SA3. PAGE 1b.
Name	LEGAL NAME OF OWNER OF CABLE S	YSTEM:		SYSTEM ID#
Name	Vyve Broadband J, LLC			028774
	CITY OR TOWN	STATE	CITY OR TOWN	STATE
	off for form	SIAL		OINTE
D				
_				
(continued)				
Area				
Served				
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	••••••	•		
		•		
			-	

Neme	LEGAL NAME OF OWNER OF CA	ABLE SYSTEM:						SYS	TEM ID
Name	Vyve Broadband J, LLC								02877
E Secondary Transmission Service: Sub- scribers and Rates	SECONDARY TRANSMISSION In General: The information in sp system, that is, the retransmissio about other services (including pri last day of the accounting period Number of Subscribers: Both down by categories of secondary each category by counting the nu separately for the particular servi Rate: Give the standard rate of unit in which it is generally billed. category, but do not include disco Block 1: In the lett-hand block systems most commonly provide that applies to your system. Note categories, that person or entity s	SERVICE: SU pace E should on of television ay cable) in sp (June 30 or D blocks in space / transmission umber of billing ice at the rate i harged for eacl (Example: "\$2 ounts allowed in space E, the to their subsci e: Where an in-	cover a and rac ace F, r ecembe ce E cal service. s in tha ndicate h categ 20/mth") for adva e torm II ribers. (dividual nted as	Ill categories of s dio broadcasts b not here. All the er 31, as the cas il tor the number . In general, you t category (the r d—not the numl ory of service. Ir b. Summarize an ance payment. Ists the categori Give the number or organization a subscriber in e	secondary by your sys facts you se may be r of subsci i can comp number of ber of sets noclude bot hy standard es of secco r of subsci i s receivin each appli	stem to subscrib state must be th). ribers to the cab pute the number persons or orga s receiving servi th the amount of d rate variations ondary transmis- ribers and rate fing service that to icable category.	pers. Give i nose existin ole system, r of subscr anizations ce). t the charg s within a p sion servic or each list alls under Example:	nformation ng on the broken ibers in charged e and the articular rate e that cable red category different a residential	
	subscriber who pays extra for cable service to additional sets would be included in the count under "Service to the first set" and would be counted once again under "Service to additional set(s)." Block 2: It your cable system has rate categories for secondary transmission service that are different from those printed in block 1 (for example, tiers of services that include one or more secondary transmissions), list them, together with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is								
	sufficient.	DCK 1					BLOCK	()	
		NO. OF	:				BLUUR	NO. OF	
	CATEGORY OF SERVICE Residential:	SUBSCRIB	ERS	RATE	CATE	EGORY OF SEF	RVICE	SUBSCRIBERS	RATE
	Service to first set Service to additional set(s)		144	25.00					
	• FM radio (if separate rate) Motel, hotel		11	25.00					
	Commercial			25.00					
	Converter								
	Residential								
	Non-residential								
F Services Other Than Secondary Transmissions: Rates	SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES In General: Space F calls for rate (not subscriber) information with respect to all your cable system's services that were not covered in space E, that is, those services that are not offered in combination with any secondary transmission service for a single fee. There are two exceptions: you do not need to give rate information concerning (1) services furnished at cost or (2) services or facilities furnished to nonsubscribers. Rate information should include both the amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, enter only the letters "PP" in the rate column. Block 1: Give the standard rate charged by the cable system for each of the applicable services listed. Block 2: List any services that your cable system furnished or offered during the accounting period that were not listed in block 1 and for which a separate charge was made or established. List these other services in the form of a brief (two- or three-word) description and include the rate for each.								
		BLO	-					BLOCK 2	
	CATEGORY OF SERVICE Continuing Services:	RATE		GORY OF SER\ ation: Non-resi		RATE	CATEG	DRY OF SERVICE	RATE
	Pay cable	19.95		tel, hotel	uentiai	T&M			
	• Pay cable—add'l channel	15.95		mmercial		T&M			
	Fire protection	N/A		y cable		T&M			
		N/A	• Pa	y cable-add'l cha	annel	T&M			
	•Burglar protection			-					
	Installation: Residential			e protection		N/A			
	Installation: Residential • First set	59.99	• Bui	e protection rglar protection		N/A N/A			
	Installation: Residential		• Bui Other	e protection					
	Installation: Residential • First set • Additional set(s)	59.99 19.99	• Bui Other • Re	e protection rglar protection services:		N/A			
	Installation: Residential • First set • Additional set(s) • FM radio (if separate rate)	59.99 19.99	• Bui Other • Re • Dis • Ou	e protection rglar protection services: connect		N/A			

Name	LEGAL NAME OF OV	WNER OF CABLE SYST	EM:	S	STEM ID
Name	Vyve Broadban	ld J, LLC			02877
	PRIMARY TRANSMITTE	ERS: TELEVISION			
G Primary ransmitters: Television	 carried by your cable s FCC rules and regulati 76.59(d)(2) and (4), 76 substitute program bas Substitute Basis S basis under specifc FC Do not list the station station was carried List the station here, basis. For further in Column 1: List eac Column 2: Give the 	system during the acco ons in effect on June 2 (a.61(e)(2) and (4), or 76 (biss, as explained in the stations: With respect CC rules, regulations, co here in space G—but only on a substitute ba and also in space I, if f formation concerning s h station's call sign. Do e number of the chann	unting period, exce 24, 1981, permitting 6.63 (referring to 76 next paragraph. to any distant static or authorizations: do list it in space I asis. the station was carr substitute basis station on treport original el on which the stati	ng translator stations and low power television stations) ept (1) stations carried only on a part-time basis under the carriage of certain network programs [sections 6.61(e)(2) and (4))]; and (2) certain stations carried on a ons carried by your cable system on a substitute program (the Special Statement and Program Log)—if the ied both on a substitute basis and also on some other tions, see page (v) of the general instructions. ion program services such as HBO, ESPN, etc. ion's broadcasts are carried in its own community. em carried the station. Identify each multicast stream	
				n. For example, report multicast stream "WETA-2" as	
	the same on the form.	in each case whether	the station is a not	work station, an independent station, or a noncommercial	
	(for independent multic For the meaning of the Column 4: Give the	cast), "E" (for noncomn se terms, see page (iv e location ot each stati	nercial educational)) of the general ins on. For U.S. station	" (for network multicast), "I" (for independent), "I-M" , or "E-M" (for noncommercial educational multicast). tructions. s, list the community to which the station is licensed by the f the community with which the station is identifed.	
	1. CALL	2. B'CAST	3. TYPE	6. LOCATION OF STATION	
	SIGN	CHANNEL	OF		
		NUMBER	STATION		
	KKTQ (KTWO)	2	N	Casper	
	KFNB	20	<u> </u>	Casper	
	KGWC	14	N	Casper	
	<mark>ксwс</mark>	6	E	Riverton	
	KWYF	11	I	Casper	
	ксwy	13	N	Casper	
	KCWY-CW	13.2	I-M	Casper	
	••••••				
	••••••				
		<mark></mark>			

ACCOUNTING PERIOD: 2018/1

FORM SA1-2. F LEGAL NAME O								IG PERIOD: 2018/
legal name o Vyve Broad			I STEWI.				SYSTEM ID# 028774	Name
, , , _,	······································						520174	
	t every radio s	tation ca	rried on a separate and discronnerally receivable" by your ca					н
receivable if (1)	it is carried by	y the sys	-Band FM Carriage: Under (tem whenever it is received a ved at the headend, with the s	t the system's hea	adend, and (2)	it can b	e expected,	Primary Transmitters: Radio
For detailed info Column 1: lo	ormation abou dentify the call	t the the sign of e	Copyright Office regulations of each station carried. n is AM or FM.					
signal, indicate	this by placing	g a check	nal was electronically process mark in the "S/D" column.					
			on (the community to which the the community with which the			or, in ti	ie case of	
CALL SIGN	AM or FM	S/D	LOCATION OF STATION	CALL SIGN	AM or FM	S/D	LOCATION OF STATION	
	t	1	l					

FORM SA1-2. PAGE 5.

						FOF	RM SA1-2. PAGE 5.
Name	LEGAL NAME OF OWNER OF		TEM:				SYSTEM ID#
	Vyve Broadband J, LL						028774
Substitute	SUBSTITUTE CARRIAGE In General: In space I, identi substitute basis during the ac explanation of the programmi	fy every nor counting pe	nnetwork televis	<i>sion program</i> broadcast by cific present and former FC	a distant static C rules, regula	ations, or authorizations.	
Carriage:	1. SPECIAL STATEMENT			• • • • • •	e general mea		
Special	During the accounting peri				is, any nonne	twork television progran	n
Statement and Program Log	broadcast by a distant stat				-	Yes	XNo
	Note: If your answer is "No" log in block 2.	, leave the	rest of this pag	e blank. If your answer is	"Yes," you mu	ust complete the program	n
	2. LOG OF SUBSTITUTE In General: List each substiclear. If you need more spare Column 1: Give the title of period, was broadcast by a under certain FCC rules, reg Do not use general categori "NBA Basketball: 76ers vs. I Column 2: If the program Column 3: Give the call s Column 4: Give the broa the case of Mexican or Cana Column 5: Give the broa the case of Mexican or Cana Column 5: Give the mon first. Example: for May 7 giv Column 6: State the time to the nearest five minutes. stated as "6:00–6:30 p.m." Column 7: Enter the letter to delete under FCC rules a gram was substituted for pro- effect on October 19, 1976.	itute progra ce, please a of every noi distant stati gulations, o es like "mor Bulls." n was broad sign of the s dcast static adian statio dth and day e "5/7." s when the Example: a er "R" if the nd regulatic	m on a separa attach additiona nnetwork televi ion and that yo r authorizations vies" or "baske dcast live, enter station broadca on's location (th ins, if any, the of when your sys e substitute pro program carrie listed program ons in effect du	al pages. ision program (substitute p ur cable system substitute s. See page (v) of the gen tball." List specific program r "Yes." Otherwise enter "h isting the substitute progra the community to which the community with which the tem carried the substitute gram was carried by your ed by a system from 6:01: was substituted for progra ring the accounting period	brogram) that, ad for the prog eral instruction n titles, for exi- vo." am. station is lice station is ider program. Use cable system 15 p.m. to 6:2 amming that y t; enter the let e under FCC r	during the accounting gramming of another star ns for further information ample, "I Love Lucy" or ensed by the FCC or, in htified). a numerals, with the mor List the times accurate (8:30 p.m. should be rour system was require ther "P" if the listed pro- rules and regulations in	tion n. hth ly d
	s		E PROGRAM	1		IBSTITUTE CARRIAG	E 7. REASON FOR DELETION
	1. TITLE OF PROGRAM	2. LIVE? Yes or No	3. STATION'S CALL SIGN	4. STATION'S LOCATION	5. MONTH AND DAY	6. TIMES FROM – TO	I ON DELE HON
						<u></u>	
						_	
						_	
						_	
						_	
						_	
					•		

FORM SA1-2. PAGE 6.		
LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#	Name
Vyve Broadband J, LLC	028774	
GROSS RECEIPTS Instructions: The figure you give in this space determines the form you fle and the amount you pay. E all amounts (gross receipts) paid to your cable system by subscribers for the system's secondary trans (as identified in space E) during the accounting period. For a turther explanation of how to compute this page (vii) of the general instructions. Gross receipts from subscribers for secondary transmission service(s) during the accounting period. IMPORTANT: You must complete a statement in space P concerning gross receipts.	smission service	K Gross Receipts
 COPYRIGHT ROYALTY FEE Instructions: To compute the royalty fee you owe: Complete block 1, block 2, or block 3. Use block 1 if the amount of gross receipts in space K is \$137,100 or less Use block 2 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to Use block 3 if the amount of gross receipts in space K is more than \$263,800 but less than \$527,600 See page (vi) of the general instructions for more information. 	\$263,800	L Copyright Royalty Fee
BLOCK 1: GROSS RECEIPTS OF \$137,100 OR LESS		
Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay fo accounting period is \$52.00	r this six-mont	
Line 1. Royalty fee for accounting period	\$ 52.00	
Line 2. Interest charge. Enter the amount from line 4, space Q, page 8	0.00	
Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 1 and 2		
BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,1	100)	
1. Base amount under statutory formula		
2. Enter amount of gross receipts from space K		
3. Subtract line 2 from line 1		
4. Enter the amount of gross receipts from space K		
5. Enter the amount from line 3		
6. Subtract line 5 from line 4		
7. Multiply line 6 by .005 (enter figure here)		
8. Interest charge. Enter the amount from line 4, space Q, page 8	0.00	
9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8		
BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527	,600)	
1. Enter the amount of gross receipts from space K		
2. Base amount under statutory formula		
3. Subtract line 2 from line 1		
4. Multiply line 3 by .01		
5. Royalty due on the first \$263,800 of gross recepits (under statutory formula)	1,319.00	
6. Interest charge. Enter the amount from line 4, space Q, page 8	0.00	
7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6		
IMPORTANT : Your remittance must be in the form of an <i>electronic payment</i> payable to <i>Register of Copyrights</i> . See general instructions for more information.	page I of the	

	· · · · · · · · · · · · · · · · · · ·	FORM SA1-2. PAGE 7
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM: Vyve Broadband J, LLC	SYSTEM ID# 028774
M	CHANNELS Instructions: You must give (1) the number of channels on which the cable syst to its subscribers and (2) the cable system's total number of activated channels,	
Channels	1. Enter the total number of channels on which the cable system carried television broadcast stations	7
	2. Enter the total number of activated channels on which the cable system carried television broadcast stations and nonbroadcast services	58
N Individual to Be Contacted	INDIVIDUAL TO BE CONTACTED IF FURTHER INFORMATION IS NEEDED: we can write or call about this statement of account.)	(Identify an individual to whom
for Further Information	Name Marie Censoplano	Telephone 914-234-8313
	Address Four International Drive, Suite 330 (Number, street, rural route, apartment, or suite number) Rye Brook, NY 10573 (City, town, state, zip) Email (optional)	
O Certifcation	 CERTIFICATION (This statement of account must be certifed and signed in accor as explained in the general instructions.) I, the undersigned, hereby certify that (Check one, but only one, of the boxes.) (Owner other than corporation or partnership) I am the owner of the cable symptotic symptot symptot	
	 (Agent of owner other than corporation or partnership) I am the duly author in line 1 of space B and that the owner is not a corporation or partnership; o (Officer or partner) I am an officer (if a corporation) or a partner (if a partnersh in line 1 of space B. 	r
	 I have examined the statement of account and hereby declare under penalty of lar are true, complete, and correct to the best of my knowledge, information, and belie [18 U.S.C., Section 1001(1986)] 	
	Handwritten signature:	Daniel J White
	Typed or printed name: Daniel J. White	
	Title: SVP - Financial Planning (Title of official position held in corporation or partnership)	
	Date: 8	/24/2018

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Offce's public indexes and in search reports prepared for the public. The effects of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal suffciency of the fling, a determination that would be made by a court of law.

ACCOUNTING PERIOD: 2018/1

FORM SA1-2. PAGE 8.

LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID#	Name
Vyve Broadband J, LLC 028774	Name
 SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the following sentence: "In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include subscribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." For more information on when to exclude these amounts, see the note on page (vii) of the general instructions. During the accounting period did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? NO YES. Enter the total here and list the satellite carrier(s) below	P Special Statement Concerning Gross Receipts Exclusion
Name Name Mailing Address Mailing Address	
You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions.	Q
Line 1 Enter the amount of late payment or underpayment	Interest Assessment
Line 2 Multiply line 1 by the interest rate* and enter the sum here	
x days	
Line 3 Multiply line 2 by the number of days late and enter the sum here	
Line 4 Multiply line 3 by 0.00274** enter here and on line 3, block 4, space L, (page 7) \$	
(interest charge) * To view the interest rate chart click on <i>www.copyright.gov/licensing/interest-rate.pdf</i> . For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@loc.gov.	
** This is the decimal equivalent of 1/365, which is the interest assessment for one day late.	
NOTE: If you are fling this worksheet covering a statement of account already submitted to the Copyright Offce, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing.	
Owner Address	
ID number First community served Accounting period	
Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Offce to collect the personally identifying information (PII) reque	l

Privacy Act Notice: Section 111 of title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on th form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The effects of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal suffciency of the fling, a determination that would be made by a court of law.